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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: Practitioners associated with the Customer Number. 30542 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name Registration Name Registration Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b) Please change the correspondence address for the application Identified in the attached statement under 37 CFR 3.73(b) to: ☑ The address associated with Customer Number: 30542 Firm or Individual Name Address Zip State City Country Fax Telephone Assignee Name and Address: Verance Corporation 4435 Eastgate Mall Suite 350 San Diego, CA 92121 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Company Name Verance Corporation Name Mario Petrocco Date June 19, 2008 Signature Murio Peter Telephone Title Sr. V.P., C.F.O. Telephone (858) 202-2800 This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file. (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take Similar to complete, including patient, preparing, and assembling the complete size from the the USPT. There will vary depending upon the including allerter, including patient, preparing, and assembling the complete application from the USPT. There will vary depending upon the included uses. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdan, should be sent to Christian and Christian a FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandrie, VA 22313-1450.